

Effective October 1, 2000

09/695325

(Column 1) (Column 2)

| | | |
|---|----------------|--------------|
| TOTAL CLAIMS | 103 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 103 minus 20 = | 83 |
| INDEPENDENT CLAIMS | 3 minus 3 = | |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> | | |

* If the difference in column 1 is less than zero, enter "0" in column 2

| (Column 1) | (Column 2) | (Column 3) |
|------------|------------|------------|
| 1 | 2 | 3 |
| 4 | 5 | 6 |
| 7 | 8 | 9 |
| 10 | 11 | 12 |
| 13 | 14 | 15 |
| 16 | 17 | 18 |
| 19 | 20 | 21 |
| 22 | 23 | 24 |
| 25 | 26 | 27 |
| 28 | 29 | 30 |
| 31 | 32 | 33 |
| 34 | 35 | 36 |
| 37 | 38 | 39 |
| 40 | 41 | 42 |
| 43 | 44 | 45 |
| 46 | 47 | 48 |
| 49 | 50 | 51 |
| 52 | 53 | 54 |
| 55 | 56 | 57 |
| 58 | 59 | 60 |
| 61 | 62 | 63 |
| 64 | 65 | 66 |
| 67 | 68 | 69 |
| 70 | 71 | 72 |
| 73 | 74 | 75 |
| 76 | 77 | 78 |
| 79 | 80 | 81 |
| 82 | 83 | 84 |
| 85 | 86 | 87 |
| 88 | 89 | 90 |
| 91 | 92 | 93 |
| 94 | 95 | 96 |
| 97 | 98 | 99 |
| 100 | 101 | 102 |
| 103 | 104 | 105 |
| 106 | 107 | 108 |
| 109 | 110 | 111 |
| 112 | 113 | 114 |
| 115 | 116 | 117 |
| 118 | 119 | 120 |
| 121 | 122 | 123 |
| 124 | 125 | 126 |
| 127 | 128 | 129 |
| 130 | 131 | 132 |
| 133 | 134 | 135 |
| 136 | 137 | 138 |
| 139 | 140 | 141 |
| 142 | 143 | 144 |
| 145 | 146 | 147 |
| 148 | 149 | 150 |
| 151 | 152 | 153 |
| 154 | 155 | 156 |
| 157 | 158 | 159 |
| 160 | 161 | 162 |
| 163 | 164 | 165 |
| 166 | 167 | 168 |
| 169 | 170 | 171 |
| 172 | 173 | 174 |
| 175 | 176 | 177 |
| 178 | 179 | 180 |
| 181 | 182 | 183 |
| 184 | 185 | 186 |
| 187 | 188 | 189 |
| 190 | 191 | 192 |
| 193 | 194 | 195 |
| 196 | 197 | 198 |
| 199 | 200 | 201 |
| 202 | 203 | 204 |
| 205 | 206 | 207 |
| 208 | 209 | 210 |
| 211 | 212 | 213 |
| 214 | 215 | 216 |
| 217 | 218 | 219 |
| 220 | 221 | 222 |
| 223 | 224 | 225 |
| 226 | 227 | 228 |
| 229 | 230 | 231 |
| 232 | 233 | 234 |
| 235 | 236 | 237 |
| 238 | 239 | 240 |
| 241 | 242 | 243 |
| 244 | 245 | 246 |
| 247 | 248 | 249 |
| 250 | 251 | 252 |
| 253 | 254 | 255 |
| 256 | 257 | 258 |
| 259 | 260 | 261 |
| 262 | 263 | 264 |
| 265 | 266 | 267 |
| 268 | 269 | 270 |
| 271 | 272 | 273 |
| 274 | 275 | 276 |
| 277 | 278 | 279 |
| 280 | 281 | 282 |
| 283 | 284 | 285 |
| 286 | 287 | 288 |
| 289 | 290 | 291 |
| 292 | 293 | 294 |
| 295 | 296 | 297 |
| 298 | 299 | 300 |
| 301 | 302 | 303 |
| 304 | 305 | 306 |
| 307 | 308 | 309 |
| 310 | 311 | 312 |
| 313 | 314 | 315 |
| 316 | 317 | 318 |
| 319 | 320 | 321 |
| 322 | 323 | 324 |
| 325 | 326 | 327 |
| 328 | 329 | 330 |
| 331 | 332 | 333 |
| 334 | 335 | 336 |
| 337 | 338 | 339 |
| 340 | 341 | 342 |
| 343 | 344 | 345 |
| 346 | 347 | 348 |
| 349 | 350 | 351 |
| 352 | 353 | 354 |
| 355 | 356 | 357 |
| 358 | 359 | 360 |
| 361 | 362 | 363 |
| 364 | 365 | 366 |
| 3 | | |

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | |
|--|---|---|------------------|--------------------------|
| | Total | * | Minus | ** |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | <input type="checkbox"/> |

OR OTHER THAN
SMALL ENTITY

| RATE | FEE | | RATE | FEE |
|-----------|--------|----|-----------|--------|
| BASIC FEE | 355.00 | OR | BASIC FEE | 710.00 |
| XS 9= | | OR | XS18= | 1494 |
| X40= | | OR | X80= | |
| +135= | | OR | +270= | |
| TOTAL | | OR | TOTAL | 2204 |

| | | | | |
|--------------------|----------------|----|--------------------|----------------|
| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
| X\$ 9= | | OR | X\$18= | |
| X40= | | OR | X80= | |
| +135= | | OR | +270= | |
| TOTAL ADDIT FEE | | OR | TOTAL ADDIT FEE | |

| | | | | |
|--------------------|----------------|----|--------------------|----------------|
| RATE | ADDITIONAL FEE | OR | RATE | ADDITIONAL FEE |
| XS 9= | | OR | XS18= | |
| X40= | | OR | X80= | |
| +135= | | OR | +270= | |
| TOTAL ADDIT FEE | | OR | TOTAL ADDIT FEE | |

| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
|-------------------|----------------|----|-------------------|----------------|
| XS 9= | | OR | XS18= | |
| X40= | | OR | X80= | |
| +135= | | OR | +270= | |
| TOTAL ADD. FEE | | OR | TOTAL ADD. FEE | |

(Column 1) (Column 2) (Column 3)

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|----------------------------------|-------|------------------------------------|--------------------------|
| | Total | * | Minus | ** |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | <input type="checkbox"/> |

| (Column 1) | (Column 2) | (Column 3) |
|------------|------------|------------|
|------------|------------|------------|

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|-------------|----------------------------------|-------|------------------------------------|---------------|
| | Total | * | Minus | ** |
| Independent | * | Minus | *** | = |

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 enter "20 "

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3"

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1